

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000002565

Entity Name: PROTERRA ELECTRIC BUSES, INC.**Current Principal Place of Business:**1815 ROLLINS RD.
BURLINGAME, CA 94010**Current Mailing Address:**1815 ROLLINS RD.
BURLINGAME, CA 94010 US**FEI Number: 27-1878459****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR	Title	CHIEF LEGAL OFFICER, SECRETARY
Name	SMITH, MICHAEL	Name	COVINGTON, JO ANN
Address	1815 ROLLINS RD.	Address	1815 ROLLINS RD.
City-State-Zip:	BURLINGAME CA 94010	City-State-Zip:	BURLINGAME CA 94010
Title	CFO, TREASURER	Title	DIRECTOR
Name	FRANCO PADILLA, KARINA	Name	GOTZ, JOCHEN
Address	1815 ROLLINS RD.	Address	1815 ROLLINS RD.
City-State-Zip:	BURLINGAME CA 94010	City-State-Zip:	BURLINGAME CA 94010
Title	DIRECTOR	Title	DIRECTOR
Name	SARGENT, JEANNINE	Name	SKIDMORE, CONSTANCE
Address	1815 ROLLINS RD.	Address	1815 ROLLINS RD.
City-State-Zip:	BURLINGAME CA 94010	City-State-Zip:	BURLINGAME CA 94010
Title	CEO, DIRECTOR	Title	DIRECTOR
Name	JOYCE, GARETH	Name	ALLEN, JOHN
Address	1815 ROLLINS RD.	Address	1815 ROLLINS RD.
City-State-Zip:	BURLINGAME CA 94010	City-State-Zip:	BURLINGAME CA 94010

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOANN COVINGTON**SECRETARY****03/30/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KRAKAUER, MARY LOUISE
Address 1815 ROLLINS RD.
City-State-Zip: BURLINGAME CA 94010

Title DIRECTOR
Name ROBINSON-BERRY, JOAN
Address 1815 ROLLINS RD.
City-State-Zip: BURLINGAME CA 94010

Title DIRECTOR
Name PORTER, BROOK
Address 1815 ROLLINS RD.
City-State-Zip: BURLINGAME CA 94010